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SDOH-1 Proportion of children aged 0-17 years living with at least one parent

employed year round, full time

Baseline: 71 percent of children ages 0-17 were living with at least one

parent employed year round, full time in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational purposes. If

warranted, a target will be set during the decade.

Data Source: Current Population Survey (CPS), Census and DOL/BLS

SDOH-2 Proportion of high school completers who were enrolled in college the

October immediately after completing high school

Baseline: 68.1 percent of high school completers were enrolled in

college the October immediately after completing high

school in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational purposes. If

warranted, a target will be set during the decade.

Data Source: Current Population Survey (CPS), Census and DOL/BLS

SDOH-3 Proportion of persons living in poverty

SDOH-3.1 Proportion of persons living in poverty

Baseline: 15.1 percent of persons were living below the poverty

threshold in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational

purposes. If warranted, a target will be set during the

decade.

Data Source: Current Population Survey (CPS), Census and

DOL/BLS

SDOH-3.2 Proportion of children aged 0-17 years living in poverty

Baseline: 22.0 percent of children ages 0 to 17 were living

below the poverty threshold in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational

purposes. If warranted, a target will be set during the

decade.

Data Source: Current Population Survey (CPS), Census and

DOL/BLS

Economic Stability

SDOH-1 Proportion of children aged 0-17 years living with at least one parent

employed year round, full time

Baseline: 71 percent of children ages 0-17 were living with at least one

parent employed year round, full time in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational purposes. If

warranted, a target will be set during the decade.

Data Source: Current Population Survey (CPS), Census and DOL/BLS

SDOH-3 Proportion of persons living in poverty

SDOH-3.1 Proportion of persons living in poverty

Baseline: 15.1 percent of persons were living below the poverty

threshold in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational

purposes. If warranted, a target will be set during the

decade.

Data Source: Current Population Survey (CPS), Census and

DOL/BLS

SDOH-3.2 Proportion of children aged 0-17 years living in poverty

Baseline: 22.0 percent of children ages 0 to 17 were living

below the poverty threshold in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational

purposes. If warranted, a target will be set during the

decade.

Data Source: Current Population Survey (CPS), Census and

DOL/BLS

DH-15 Reduce unemployment among people with disabilities

Baseline: 14.5 percent of people with disabilities were unemployed in

2009

Target: 13.1 percent

Target-Setting Method: 10 percent improvement

Data Source: Current Population Survey (CPS), Census and DOL/BLS

DH-16 Increase employment among people with disabilities

Baseline: 19.2 percent of people with disabilities were employed in

2009

Target: 21.1 percent

Target-Setting Method: 10 percent improvement

Data Source: Current Population Survey (CPS), Census and DOL/BLS

EH-2 Increase use of alternative modes of transportation for work

EH-2.1 Increase trips to work made by bicycling

Baseline: 0.5 percent of trips were made to work via bicycle in

2008

Target: 0.6 percent

Target-Setting Method: 10 percent improvement

Data Source: American Community Survey (ACS), Census

EH-2.2 Increase trips to work made by walking

Baseline: 2.8 percent of trips were made to work via walking in

2008

Target: 3.1 percent

Target-Setting Method: 10 percent improvement

Data Source: American Community Survey (ACS), Census

EH-2.3 Increase trips to work made by mass transit

Baseline: 5.0 percent of trips were made to work via mass

transit in 2008

Target: 5.5 percent

Target-Setting Method: 10 percent improvement

Data Source: American Community Survey (ACS), Census

EH-2.4 Increase the proportion of persons who telecommute

Baseline: 4.1 percent of employees telecommuted in 2008

Target: 5.3 percent

Target-Setting Method: Projection/trend analysis

Data Source: American Community Survey (ACS), Census

MHMD-8 Increase the proportion of persons with serious mental illness (SMI) who

are employed

Baseline: 58.6 percent of persons with serious mental illness (SMI)

were employed in 2008

Target: 64.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

NWS-12 Eliminate very low food security among children

Baseline: 1.3 percent of households with children had very low food

security among children in 2008

Target: 0.2 percent

Target-Setting Method: Maintain consistency with national programs, regulations,

policies, and laws.

Data Source: Current Population Survey (CPS), Census and DOL/BLS

NWS-13 Reduce household food insecurity and in doing so reduce hunger

Baseline: 14.6 percent of households were food insecure in 2008

Target: 6.0 percent

Target-Setting Method: Retention of Healthy People 2010 target

Data Source: Current Population Survey (CPS), Census and DOL/BLS

OSH-1.1 Reduce deaths from work-related injuries in all industries

Baseline: 4.0 work-related injury deaths per 100,000 full-time

equivalent workers occurred in 2007

Target: 3.6 deaths per 100,000 full-time equivalent workers

Target-Setting Method: 10 percent improvement

Data Source: Census of Fatal Occupational Injuries (CFOI), DOL/BLS;

Current Population Survey (CPS), Census and DOL/BLS

Education:

SDOH-2 Proportion of high school completers who were enrolled in college the

October immediately after completing high school

Baseline: 68.1 percent of high school completers were enrolled in

college the October immediately after completing high

school in 2010

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational purposes. If

warranted, a target will be set during the decade.

Data Source: Current Population Survey (CPS), Census and DOL/BLS

AH-5.1 Increase the proportion of students who graduate with a regular diploma 4

years after starting 9th grade

Baseline: 74.9 percent of students attending public schools graduated

with a regular diploma in 2007–08, 4 years after starting 9th

grade

Target: 82.4 percent

Target-Setting Method: 10 percent improvement

Data Source: Common Core of Data (CCD), ED/NCES

AH-6 Increase the proportion of schools with a school breakfast program

Baseline: 68.6 percent of schools overall, including public and private

elementary, middle, and high schools, had a school

breakfast program in 2006

Target: 75.5 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

AH-7 Reduce the proportion of adolescents who have been offered, sold or

given an illegal drug on school property

Baseline: 22.7 percent of students in grades 9 through 12 were

offered, sold, or given an illegal drug on school property

during the past 12 months, as reported in 2009

Target: 20.4 percent

Target-Setting Method: 10 percent improvement

Data Source: Youth Risk Behavior Surveillance System (YRBSS),

CDC/NCCDPHP

DH-14 Increase the proportion of children and youth with disabilities who spend

at least 80 percent of their time in regular education programs

Baseline: 56.8 percent of children and youth with disabilities spent at

least 80 percent of their time in regular education

classrooms in 2007-08

Target: 73.8 percent

Target-Setting Method: Projection/trend analysis

Data Source: Data Accountability Center (DAC), ED/OSERS

ECBP-6 Increase the proportion of the population that completes high school

education

Baseline: 89.0 percent of persons aged 18 to 24 years old had

completed high school in 2007

Target: 97.9 percent

Target-Setting Method: 10 percent improvement

Data Source: Current Population Survey (CPS), Census and DOL/BLS

EH-23 Reduce the number of new schools sited within 500 feet of an interstate or

Federal or State highway

Baseline: 18.9 percent of schools were located within 500 feet of an

interstate or Federal or State highway in 2005–06

Target: 18.9 percent or less of schools located within 500 feet

Target-Setting Method: Maintain consistency with national programs, regulations,

policies, and laws.

Data Source: Geospatial Research, Analysis and Services Program

(GRASP), CDC/ATSDR

EMC-4 Increase the proportion of elementary, middle, and senior high schools

that require school health education

EMC-4.1 Increase the proportion of schools that require newly hired staff

who teach required health education to have undergraduate or

graduate training in health education

EMC-4.1.1 Increase the proportion of elementary schools that require

newly hired staff who teach required health education to

have undergraduate or graduate training in health education

Baseline: 35.2 percent of elementary schools, including

public and private schools, required newly

hired staff who taught required health

education to have undergraduate or graduate

training in health education in 2006

Target: 38.7 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.1.2 Increase the proportion of middle schools that require newly hired staff who teach required health education to have undergraduate or graduate training in health education

Baseline: 56.9 percent of middle schools, including public

and private schools, required newly hired staff who taught required health education to have undergraduate or graduate training in health

education in 2006

Target: 62.6 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.1.3 Increase the proportion of high schools that require newly

hired staff who teach required health education to have undergraduate or graduate training in health education

Baseline: 76.8 percent of high schools, including public

and private schools, required newly hired staff who taught required health education to have undergraduate or graduate training in health

education in 2006

Target: 84.5 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.2 Increase the proportion of schools that require newly hired staff

who teach required health instruction to be certified, licensed, or

endorsed by the State in health education

EMC-4.2.1 Increase the proportion of elementary schools that require newly hired staff who teach required health instruction to be certified, licensed, or endorsed by the State in health education

Baseline: 32.5 percent of elementary schools, including

public and private schools, required newly

hired staff who taught required health

instruction to be certified, licensed, or endorsed

by the State in health education in 2006

Target: 35.8 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.2.2 Increase the proportion of middle schools that require newly

hired staff who teach required health instruction to be certified, licensed, or endorsed by the State in health

education

Baseline: 50.7 percent of middle schools, including public

and private schools, required newly hired staff who taught required health instruction to be certified, licensed, or endorsed by the State in

health education in 2006

Target: 55.8 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.2.3 Increase the proportion of high schools that require newly hired staff who teach required health instruction to be certified, licensed, or endorsed by the State in health education

Baseline: 72.8 percent of high schools, including public

and private schools, required newly hired staff who taught required health instruction to be certified, licensed, or endorsed by the State in

health education in 2006

Target: 80.1 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.3 Increase the proportion of schools that require cumulative instruction in health education that meet the US National Health Education Standards for elementary, middle, and senior high schools

EMC-4.3.1 Increase the proportion of elementary schools that require cumulative instruction in health education that meet the US National Health Education Standards for elementary, middle, and senior high schools

Baseline: 7.5 percent of elementary schools, including

public and private schools, required cumulative instruction in health education that met the US National Health Education Standards in 2006

Target: 11.5 percent

Target-Setting Method: 4 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.3.2 Increase the proportion of middle schools that require

cumulative instruction in health education that meet the US National Health Education Standards for elementary, middle,

and senior high schools

Baseline: 10.3 percent of middle schools, including public

and private schools, required cumulative

instruction in health education that met the US National Health Education Standards in 2006

Target: 14.3 percent

Target-Setting Method: 4 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.3.3 Increase the proportion of high schools that require

cumulative instruction in health education that meet the US

National Health Education Standards for elementary, middle,

and senior high school

Baseline: 6.5 percent of high schools, including public

and private schools, required cumulative

instruction in health education that met the US National Health Education Standards in for elementary, middle, and senior high schools

2006

Target: 10.5 percent

Target-Setting Method: 4 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

EMC-4.4 Increase the proportion of required health education classes or

courses with a teacher who has had professional development related to teaching personal and social skills for behavior change

within the past 2 years

Baseline: 52.5 percent of required health education classes or

courses were taught by a teacher who has had

professional development related to teaching

personal and social skills for behavior change within

the past 2 years in 2006

Target: 57.8 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

Increase the proportion of elementary, middle and senior high schools that provide comprehensive school health education to prevent health problems in the following areas: unintentional injury; violence; suicide; tobacco use and addiction; alcohol or other drug use; unintended pregnancy, HIV/AIDS and STD infection; unhealthy dietary patterns; and inadequate physical activity

ECBP-2.1 Increase the proportion of elementary, middle and senior high schools that provide comprehensive school health education to prevent health problems in all priority areas

Baseline: 25.6 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent health problems in all priority

areas in 2006

Target: 28.2 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.2 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in unintentional injury

Baseline: 81.7 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent unintentional injury in 2006

Target: 89.9 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.3 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in violence

Baseline: 81.9 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent violence in 2006

Target: 90.1 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.4 Increase the proportion of elementary, middle and senior high schools that provide comprehensive school health education to prevent health problems in suicide

Baseline: 43.9 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent suicide in 2006

Target: 48.3 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.5 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in tobacco use and addiction

Baseline: 81.0 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent tobacco use and addiction in

2006

Target: 89.1 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.6 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in alcohol and other drug use

Baseline: 81.7 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent alcohol or other drug use in 2006

Target: 89.9 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.7 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to prevent health problems in unintended pregnancy, HIV/AIDS, and

STD infection

Baseline: 39.3 percent of elementary, middle, and senior high

schools provided comprehensive school health education to prevent unintended pregnancy,

HIV/AIDS, and STD infection in 2006

Target: 43.2 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.8 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in unhealthy dietary patterns

Baseline: 84.3 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent unhealthy dietary patterns in

2006

Target: 92.7 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

ECBP-2.9 Increase the proportion of elementary, middle and senior high

schools that provide comprehensive school health education to

prevent health problems in inadequate physical activity

Baseline: 79.2 percent of elementary, middle, and senior high

schools provided comprehensive school health

education to prevent inadequate physical activity in

2006

Target: 87.1 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

PA-4 Increase the proportion of the Nation's public and private schools that require daily physical education for all students

PA-4.1 Increase the proportion of the Nation's public and private

elementary schools that require daily physical education for all

students

Baseline: 3.8 percent of public and private elementary schools

required daily physical education for all students in

2006

Target: 4.2 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

PA-4.2 Increase the proportion of the Nation's public and private middle

and junior high schools that require daily physical education for all

students

Baseline: 7.8 percent of public and private middle and junior

high schools required daily physical education for all

students in 2006

Target: 8.6 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

PA-4.3 Increase the proportion of the Nation's public and private senior

high schools that require daily physical education for all students

Baseline: 2.1 percent of public and private senior high schools

required daily physical education for all students in

2006

Target: 2.3 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study

(SHPPS), CDC/NCCDPHP

PA-7 Increase the proportion of school districts that require or recommend

elementary school recess for an appropriate period of time

Baseline: 61.5 percent of school districts required or recommended

elementary school recess for an appropriate period of time in

2006

Target: 67.7 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

TU-15 Increase tobacco-free environments in schools, including all school facilities, property, vehicles, and school events

TU-15.1 Increase tobacco-free environments in junior high schools,

including all school facilities, property, vehicles, and school events

Baseline: 65.4 percent of junior high schools had tobacco-free

environments, including all school facilities, property,

vehicles, and school events, in 2006

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

TU-15.2 Increase tobacco-free environments in middle schools, including all

school facilities, property, vehicles, and school events

Baseline: 58.7 percent of middle schools had tobacco-free

environments, including all school facilities, property,

vehicles, and school events, in 2006

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

TU-15.3 Increase tobacco-free environments in high schools, including all

school facilities, property, vehicles, and school events

Baseline: 66.1 percent of high schools had tobacco-free

environments, including all school facilities, property,

vehicles, and school events in 2006

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

Health and Health Care:

AH-1 Increase the proportion of adolescents who have had a wellness checkup in

the past 12 months

Baseline: 68.7 percent of adolescents aged 10 to 17 years had a

wellness checkup in the past 12 months, as reported in 2008

Target: 75.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-1.1 Increase the proportion of persons with medical insurance

Baseline: 83.2 percent of persons had medical insurance in 2008

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-3 Increase the proportion of persons with a usual primary care provider

Baseline: 76.3 percent of persons had a usual primary care provider in

2007

Target: 83.9 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

AHS-5 Increase the proportion of persons who have a specific source of ongoing

care

AHS-5.1 Increase the proportion of persons of all ages who have a specific

source of ongoing care

Baseline: 86.4 percent of persons of all ages had a specific

source of ongoing care in 2008

Target: 95.0 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-5.2 Increase the proportion of children and youth aged 17 years and

under who have a specific source of ongoing care

Baseline: 94.3 percent of children and youth aged 17 years and

under had a specific source of ongoing care in 2008

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-5.3 Increase the proportion of persons of all aged 18-64 who have a

specific source of ongoing care

Baseline: 81.3 percent of persons aged 18 to 64 years had a

specific source of ongoing care in 2008

Target: 89.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-5.4 Increase the proportion of persons of all aged 65 years and older

who have a specific source of ongoing care

Baseline: 96.3 percent of persons aged 65 years and older had

a specific source of ongoing care in 2008

Target: 100 percent

Target-Setting Method: Total coverage

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

AHS-6 Reduce the proportion of individuals who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines

AHS-6.1 Reduce the proportion of individuals who are unable to obtain or

delay in obtaining necessary medical care, dental care, or

prescription medicines

Baseline: 10.0 percent of all persons were unable to obtain or

delayed in obtaining necessary medical care, dental

care, or prescription medicines in 2007

Target: 9.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

AHS-6.2 Reduce the proportion of individuals who are unable to obtain or

delay in obtaining necessary medical care

Baseline 4.7 percent of all persons were unable to obtain or

delayed in obtaining necessary medical care in 2007

Target: 4.2 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

AHS-6.3 Reduce the proportion of individuals who are unable to obtain or

delay in obtaining necessary dental care

Baseline: 5.5 percent of all persons were unable to obtain or

delayed in obtaining necessary dental care in 2007

Target: 5.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

AHS-6.4 Reduce the proportion of individuals who are unable to obtain or

delay in obtaining necessary prescription medicines

Baseline: 3.1 percent of all persons were unable to obtain or

delayed in obtaining necessary prescription medicines

in 2007

Target: 2.8 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

C-16 Increase the proportion of adults who receive a colorectal cancer

screening based on the most recent guidelines (LHI)

Baseline: 52.1 percent of adults aged 50 to 75 years received a

colorectal cancer screening based on the most recent

guidelines in 2008 (age adjusted to the year 2000 standard

population)

Target: 70.5 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

D-5.1 Reduce the proportion of persons with diabetes with an A1c value greater

than 9 percent (LHI)

Baseline: 17.9 percent of adults aged 18 years and older with

diagnosed diabetes had an A1c value greater than 9 percent

in 2005–08 (age adjusted to the year 2000 standard

population)

Target: 16.1 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in the following areas

ECBP-10.1 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in injury

Baseline: 76.6 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State agencies) provided population-based primary injury

prevention services in 2008

Target: 84.3 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.2 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in violence

Baseline: 66.9 percent of community-based organizations

(including local health departments, Tribal health services, nongovernmental organizations, and State agencies) provided population-based primary violence

prevention services in 2008

Target: 73.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.3 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in mental illness

Baseline: 63.2 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State

agencies) provided population-based primary prevention services in mental illness in 2008

Target: 69.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.4 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in tobacco use

Baseline: 88.0 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State

agencies) provided population-based primary prevention services in tobacco use in 2008

Target: 96.7 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.5 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in substance abuse

Baseline 68.9 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State

agencies) provided population-based primary prevention services in substance abuse in 2008

Target: 75.8 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.6 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in unintended pregnancy

Baseline: 81.3 percent of community-based organizations

(including local health departments, Tribal health services, nongovernmental organizations, and State

agencies) provided population-based primary

prevention services in unintended pregnancy in 2008

Target: 89.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.7 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based

primary prevention services in chronic disease programs

Baseline: 82.6 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State

agencies) provided population-based primary

prevention services in chronic disease programs in

2008

Target: 90.8 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.8 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services in nutrition

Baseline: 86.1 percent of community-based organizations

(including local health departments, Tribal health services, nongovernmental organizations, and State

agencies) provided population-based primary

prevention services in nutrition in 2008

Target: 94.7 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

ECBP-10.9 Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services injury in physical activity

Baseline: 80.5 percent of community-based organizations

(including local health departments, Tribal health

services, nongovernmental organizations, and State

agencies) provided population-based primary prevention services in physical activity in 2008

Target: 88.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Profile of Local Health Departments

(NPLHD), National Association of County and City

Health Officials (NACCHO)

FP-3 Increase the proportion of publicly funded family planning clinics that offer the full-range of FDA-approved methods of contraception, including emergency contraception, onsite

FP-3.1 Increase the proportion of publicly funded family planning clinics

that offer the full-range of FDA-approved methods of contraception

onsite

Baseline: 38.3 percent of publicly funded family planning clinics

offered the full range of FDA-approved methods of

contraception onsite, as reported in 2003

Target: 47.9 percent

Target-Setting Method: Projection/trend analysis

Data Source: Survey of Contraceptive Service Providers,

Guttmacher Institute

FP-3.2 Increase the proportion of publicly funded family planning clinics

that offer emergency contraception onsite

Baseline: 79.7 percent of publicly funded family planning clinics

offered emergency contraception onsite, as reported

in 2003

Target: 87.7 percent

Target-Setting Method: 10 percent improvement

Data Source: Survey of Contraceptive Service Providers,

Guttmacher Institute

FP-7 Increase the proportion of sexually experienced persons who received reproductive health services

FP-7.1 Increase the proportion of sexually experienced females aged 15 to

44 years who received reproductive health services in the past 12

months (LHI)

Baseline: 78.6 percent of sexually experienced females aged 15

to 44 years received reproductive health services in

the past 12 months, as reported in 2006–10

Target: 86.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Family Growth (NSFG),

CDC/NCHS

FP-7.2 Increase the proportion of sexually experienced males aged 15 to

44 years who received reproductive health services in the past 12

months

Baseline: 14.8 percent of sexually experienced males aged 15

to 44 years received reproductive health services in

the past 12 months, as reported in 2006–10

Target: 16.3 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Family Growth (NSFG),

CDC/NCHS

HC/HIT-2 Increase the proportion of persons who report that their health care providers have satisfactory communication skills

HC/HIT-2.1 Increase the proportion of person who report that their health care providers always listened carefully to them

Baseline: 59.0 percent of persons reported that their health care

providers always listened carefully to them in 2007

Target: 65.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

HC/HIT-2.2 Increase the proportion of persons who report that their health care

providers always explain things so they could understand them

Baseline: 60.0 percent of persons reported that their health care

providers always explained things so they could

understand them in 2007

Target: 66.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

HC/HIT-2.3 Increase the proportion of persons who report that their health care

providers always showed respect for what they had to say

Baseline: 62.0 percent of persons reported that their health care

providers always showed respect for what they had to

say in 2007

Target: 68.2 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

HC/HIT-2.4 Increase the proportion of persons who report that their health care

providers always spend enough time with them

Baseline: 49.0 percent of persons reported that their health care

providers always spent enough time with them in

2007

Target: 54.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

HC/HIT-3 Increase the proportion of persons who report that their health care

providers always involved them in decisions about their health care as

much as they wanted

Baseline: 51.6 percent of persons reported that their health care

providers always involved them in decisions about their

health care as much as they wanted in 2007

Target: 56.8 percent

Target-Setting Method: 10 percent improvement

Data Source: Health Information National Trends Survey (HINTS),

NIH/NCI

HC/HIT-10 Increase the proportion of medical practices that use electronic health

records.

Baseline: 25.0 percent of medical practices reported using electronic

health records in 2007

Target: 27.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Ambulatory Medical Care Survey (NAMCS),

CDC/NCHS

HIV-13 Increase the proportion of persons living with HIV who know their

serostatus (LHI)

Baseline: 80.6 percent of persons aged 13 years and older living with

HIV were aware of their HIV infection in 2006

Target: 90.0 percent

Target-Setting Method: Maintain consistency with national programs, regulations,

policies, and laws.

Data Source: National HIV Surveillance System (NHSS), CDC/NCHHSTP

IID-8 Increase the proportion of children ages 19 to 35 months who receive the

recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella and

pneumococcal conjugate vaccine (PCV) (LHI)

Baseline: 44.3 percent of children aged 19 to 35 months in 2009

received the recommended doses of DTaP, polio, MMR, Hib,

hepatitis B, varicella, and PCV

Target: 80.0 percent

Target-Setting Method: Maintain consistency with national programs, regulations,

policies, and laws.

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

IVP-8 Increase access to trauma care in the United States

IVP-8.1 Increase the proportion of the population residing within the

continental United States with access to trauma care

Baseline: 83.1 percent of the population residing within the

continental United States had access to trauma care

in 2009

Target: 91.4 percent

Target-Setting Method: 10 percent improvement

Data Source: Trauma Information Exchange Program (TIEP),

American Trauma Society (ATS)

IVP-8.2 Increase the proportion of the land mass of the continental United

States had access to trauma care

Baseline: 28.7 percent of the land mass of the continental

United States had access to trauma care in 2009

Target: 31.6 percent

Target-Setting Method: 10 percent improvement

Data Source: Trauma Information Exchange Program (TIEP),

American Trauma Society (ATS)

MHMD-1 Reduce the suicide rate (LHI)

Baseline: 11.3 suicides per 100,000 population occurred in 2007

Target: 10.2 suicides per 100,000 population

Target-Setting Method: 10 percent improvement

Data Source: National Vital Statistics System-Mortality (NVSS-M),

CDC/NCHS

MHMD-9 Increase the proportion of adults with mental disorders who receive treatment

MHMD-9.1 Increase the proportion of adults aged 18 years and older with

serious mental illness (SMI) who receive treatment

Baseline: 58.7 percent of adults aged 18 years and older with

serious mental illness (SMI) received treatment in

2008

Target: 64.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

MHMD-9.2 Increase the proportion of adults aged 18 years and older with

major depressive episodes (MDEs) who receive treatment

Baseline: 71.1 percent of adults aged 18 years and older with

major depressive episodes received treatment in

2008

Target: 78.2 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

MHMD-11 Increase depression screening by primary care providers

MHMD-11.1 Increase the proportion of primary care physicians who screen

adults aged 19 years and older for depression during office visits

Baseline: 2.2 percent of primary care physicians screened

adults aged 19 years and older for depression during

office visits in 2007

Target: 2.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Ambulatory Medical Care Survey (NAMCS),

CDC/NCHS

MHMD-11.2 Increase the proportion of primary care physicians who screen

youth aged 12 to 18 years for depression during office visits

Baseline: 2.1 percent of primary care physicians screened

youth aged 12 to 18 for depression during office visits

in 2005–07

Target: 2.3 percent

Target-Setting Method: 10 percent improvement

Data Source: National Ambulatory Medical Care Survey (NAMCS),

CDC/NCHS

MHMD-12 Increase the proportion of homeless adults with mental health problems

who receive mental health services

Baseline: 37.0 percent of homeless adults with mental health problems

received mental health services in 2006

Target: 41.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Projects for Assistance in Transition from Homelessness

(PATH), SAMHSA/CMHS

MICH-1.3 Reduce the rate of fetal and infant deaths. (within 1 year) (LHI)

Baseline: 6.7 infant deaths per 1,000 live births occurred within the first

year of life in 2006

Target: 6.0 infant deaths per 1,000 live births

Target-Setting Method: 10 percent improvement

Data Source: Linked Birth/Infant Death Data Set, CDC/NCHS

MICH-9 Reduce total preterm births (LHI)

Baseline: 12.7 percent of live births were preterm in 2007

Target: 11.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Vital Statistics System-Natality (NVSS-N),

CDC/NCHS

NWS-9 Reduce the proportion of adults who are obese (LHI)

Baseline: 33.9 percent of persons aged 20 years and older were

obese in 2005–08 (age adjusted to the year 2000 standard

population)

Target: 30.5 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

OA-2 Increase the proportion of older adults who are up to date on a core set of

clinical preventive services

OA-2.1 Increase the proportion of males aged 65 years and older who are

up to date on a core set of clinical preventive services

Baseline: 46.3 percent of males aged 65 years and older were

up to date on a core set of clinical preventive services

in 2008

Target: 50.9 percent

Target-Setting Method: 10 percent improvement

Data Source: Behavioral Risk Factor Surveillance System (BRFSS),

CDC/PHSPO

OA-2.2 Increase the proportion of females aged 65 years and older who

are up to date on a core set of clinical preventive services

Baseline: 47.9 percent of males aged 65 years and older were

up to date on a core set of clinical preventive services

in 2008

Target: 52.7 percent

Target-Setting Method: 10 percent improvement

Data Source: Behavioral Risk Factor Surveillance System (BRFSS),

CDC/PHSPO

OH-7 Increase the proportion of children, adolescents and adults who used the

oral health care system in the past year (LHI)

Baseline: 44.5 percent of persons aged 2 years and older had a dental

visit in the past year in 2007

Target: 49.0 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

OH-8 Increase the proportion of low-income children and adolescents who

received any preventive dental service during the past year

Baseline: 30.2 percent of children and adolescents aged 2 to 18 years

at or below 200 percent of the Federal poverty level received

a preventive dental service during the past year in 2007

Target: 33.2 percent

Target-Setting Method: 10 percent improvement

Data Source: Medical Expenditure Panel Survey (MEPS), AHRQ

OH-11 Increase the proportion of patients who receive oral health services at

Federally Qualified Health Centers (FQHCs) each year

Baseline: 17.5 percent of patients at FQHCs received oral health

services in 2007

Target: 33.3 percent

Target-Setting Method: Projection/trend analysis

Data Source: Uniform Data System (UDS), HRSA/BPHC

SA-13 Reduce past-month use of illicit substances

SA-13.1 Reduce the proportion of adolescents reporting use of alcohol or

any illicit drugs during the past 30 days (LHI)

Baseline: 18.4 percent of adolescents aged 12 to 17 years

reported use of alcohol or any illicit drugs during the

past 30 days in 2008

Target: 16.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

SA-13.2 Reduce the proportion of adolescents reporting use of marijuana

during the past 30 days

Baseline: 6.7 percent of adolescents aged 12 to 17 years

reported use of marijuana during the past 30 days in

2008

Target: 6.0 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

SA-13.3 Reduce the proportion of adults reporting use of any illicit drug

during the past 30 days

Baseline: 7.9 percent of adults aged 18 years and older

reported use of any illicit drug during the past 30 days

in 2008

Target: 7.1 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

SA-14.3 Reduce the proportion of persons engaging in binge drinking during the

past 30 days—adults aged 18 years and older (LHI)

Baseline: 27.1 percent of adults aged 18 years and older reported that

they engaged in binge drinking during the past 30 days in

2008

Target: 24.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

TU-1 Reduce tobacco use by adults

TU-1.1 Reduce cigarette smoking by adults

Baseline: 20.6 percent of adults aged 18 years and older were

current cigarette smokers in 2008 (age adjusted to the

year 2000 standard population)

Target: 12.0 percent

Target-Setting Method: Retention of Healthy People 2010 target

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

TU-1.2 Reduce use of smokeless tobacco products by adults

Baseline: 2.3 percent of adults aged 18 years and older were

current users of snuff or chewing tobacco products in

2005 (age adjusted to the year 2000 standard

population)

Target: 0.3 percent

Target-Setting Method: 2 percentage point improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

TU-1.3 Reduce use of cigars by adults

Baseline: 2.2 percent of adults aged 18 years and older were

current cigar smokers in 2005 (age adjusted to the

year 2000 standard population)

Target: 0.2 percent

Target-Setting Method: 2 percentage point improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

TU-2 Reduce tobacco use by adolescents

TU-2.1 Reduce use of tobacco products by adolescents (past month)

Baseline: 26.0 percent of adolescents in grades 9 through 12

used cigarettes, chewing tobacco, snuff, or cigars in

the past 30 days in 2009

Target: 21.0 percent

Target-Setting Method: Retention of Healthy People 2010 target

Data Source: Youth Risk Behavior Surveillance System (YRBSS),

CDC/NCCDPHP

TU-2.2 Reduce use of cigarettes by adolescents (past month)

Baseline: 19.5 percent of adolescents in grades 9 through 12

smoked cigarettes in the past 30 days in 2009

Target: 16.0 percent

Target-Setting Method: Retention of Healthy People 2010 target

Data Source: Youth Risk Behavior Surveillance System (YRBSS),

CDC/NCCDPHP

TU-2.3 Reduce use of smokeless tobacco products by adolescents (past

month)

Baseline: 8.9 percent of adolescents in grades 9 through 12

used smokeless (chewing tobacco or snuff) tobacco

products in the past 30 days in 2009

Target: 6.9 percent

Target-Setting Method: 2 percentage point improvement

Data Source: Youth Risk Behavior Surveillance System (YRBSS),

CDC/NCCDPHP

TU-2.4 Reduce use of cigars by adolescents (past month)

Baseline: 14.0 percent of adolescents in grades 9 through 12

smoked cigars in the past 30 days in 2009

Target: 8.0 percent

Target-Setting Method: Retention of Healthy People 2010 target

Data Source: Youth Risk Behavior Surveillance System (YRBSS),

CDC/NCCDPHP

TU-9 Increase tobacco screening in health care settings

TU-9.1 Increase tobacco screenings in office-based ambulatory care

settings

Baseline: 62.4 percent of office-based ambulatory care setting

visits among patients aged 18 years and older had

tobacco screening in 2007

Target: 68.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Ambulatory Medical Care Survey (NAMCS),

CDC/NCHS

TU-9.2 Increase tobacco screenings in hospital ambulatory care settings

Baseline: 60.2 percent of hospital ambulatory care setting visits

among patients aged 18 years and older had tobacco

screening in 2007

Target: 66.2 percent

Target-Setting Method: 10 percent improvement

Data Source: National Ambulatory Medical Care Survey (NAMCS),

CDC/NCHS

TU-11 Reduce the proportion of non-smokers exposed to second hand smoke.

TU-11.1 Reduce the proportion of children aged 3 to 11 years exposed to

secondhand smoke (LHI)

Baseline: 52.2 percent of children aged 3 to 11 years were

exposed to secondhand smoke in 2005-08

Target: 47.0 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

Neighborhood and Built Environment:

EH-1 Reduce the number of days the Air Quality Index (AQI) exceeds 100,

weighted by population and AQI (LHI)

Baseline: 2,200,000,000 billion Air Quality Index (AQI)-weighted

people days exceeded 100 on the AQI in 2008

Target: 1,980,000,000 billion AQI-weighted people days

Target-Setting Method: 10 percent improvement

Data Source: Air Quality System (AQS), EPA

EH-4 Increase the proportion of persons served by community water systems

who receive a supply of drinking water that meets the regulations of the

Safe Drinking Water Act

Baseline: 92.0 percent of persons served by community water systems

received a supply of drinking water that meets the

regulations of the Safe Drinking Water Act in 2008

Target: 91 percent

Target-Setting Method: Maintain consistency with national programs, regulations,

policies, and laws.

Data Source: Safe Drinking Water Information System (SDWIS), EPA/OW

EH-8 Reduce blood lead levels in children

EH-8.1 Eliminate elevated blood lead levels in children

Baseline: 0.9 percent of children had elevated blood lead levels

in 2005-08

Target: Not applicable

Target-Setting Method: This measure is being tracked for informational

purposes. If warranted, a target will be set during the

decade.

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

EH-8.2 Reduce the mean blood lead levels in children

Baseline: 1.5 µg/dL was the average blood lead level in children

aged 1 to 5 years in 2005–08

Target: 1.4 μg/dL average blood lead level in children aged 1

to 5 years

Target-Setting Method: 10 percent improvement

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

EH-9 Minimize the risks to human health and the environment posed by

hazardous sites.

Baseline: 1,279 hazardous sites presented risks to human health and

the environment in 2010

Target: 1,151 sites

Target-Setting Method: 10 percent improvement

Data Source: Comprehensive Environmental Response and Cleanup

Information System (CERLIS), EPA/OSWER

EH-13: Reduce indoor allergen levels

EH-13.1 Reduce indoor allergen levels—cockroach

Baseline: 0.51 units of cockroach allergen/gram of settled dust

were reported in 2006

Target: 0.46 units of cockroach allergen/gram of settled dust

Target-Setting Method: 10 percent improvement

Data Source: American Healthy Homes Survey (AHHS), HUD

EH-13.1 Reduce indoor allergen levels—mouse

Baseline: 0.16 micrograms of mouse allergen/gram of settled

dust were reported in 2006

Target: 0.14 micrograms of mouse allergen/gram of settled

dust

Target-Setting Method: 10 percent improvement

Data Source: American Healthy Homes Survey (AHHS), HUD

EH-19 Reduce the proportion of occupied housing units that have moderate or

severe physical problems

Baseline: 5.2 percent of housing units had moderate or severe

physical problems in 2007

Target: 4.2 percent

Target-Setting Method: Projection/trend analysis

Data Source: American Housing Survey (AHS), HUD and Census

EH-22 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental hazards

EH-22.1 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to lead poisoning

Baseline: 29 States and the District of Columbia monitored lead

poisoning in 2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.2 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to pesticide poisoning

Baseline: 28 States monitored pesticide poisoning in 2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.3 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to mercury poisoning

Baseline: 24 States monitored mercury poisoning in 2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.4 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to arsenic poisoning

Baseline: 22 States monitored arsenic poisoning in 2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.5 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to cadmium poisoning

Baseline: 21 States monitored cadmium poisoning in 2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.6 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to chemical poisoning

Baseline: 17 States monitored acute chemical poisoning in

2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

EH-22.7 Increase the number of States, Territories, Tribes, and the District

of Columbia that monitor diseases or conditions that can be caused

by exposure to carbon monoxide poisoning

Baseline: 20 States monitored carbon monoxide poisoning in

2009

Target: 56 States, Territories, and the District of Columbia

Target-Setting Method: Total coverage

Data Source: State Reportable Conditions Data Inventory, Council

of State and Territorial Epidemiologists (CSTE)

IVP-1 Reduce fatal injuries (LHI)

Baseline: 59.2 deaths per 100,000 population were caused by injuries

in 2007 (age adjusted to the year 2000 standard population)

Target: 53.3 deaths per 100,000 population

Target-Setting Method: 10 percent improvement

Data Source: National Vital Statistics System-Mortality (NVSS-M),

CDC/NCHS

IVP-29 Reduce homicides (LHI)

Baseline: 6.1 homicides per 100,000 population occurred in 2007 (age

adjusted to the year 2000 standard population)

Target: 5.5 homicides per 100,000 population

Target-Setting Method: 10 percent improvement

Data Source: National Vital Statistics System-Mortality (NVSS-M),

CDC/NCHS

IVP-30 Reduce firearm-related deaths

Baseline: 10.2 firearm-related deaths per 100,000 population occurred

in 2007 (age adjusted to the year 2000 standard population)

Target: 9.2 deaths per 100,000 population

Target-Setting Method: 10 percent improvement

Data Source: National Vital Statistics System-Mortality (NVSS-M),

CDC/NCHS

IVP-33 Reduce physical assaults.

Baseline: 21.3 physical assaults per 1,000 population aged 12 years

and older occurred in 2008

Target: 19.2 physical assaults per 1,000 population

Target-Setting Method: 10 percent improvement

Data Source: National Crime Victimization Survey, DOJ/BJS

IVP-42 Reduce children's exposure to violence

Baseline: 58.8 percent of children were exposed to any form of

violence, crime, and abuse measured in 2008

Target: 52.9 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Exposure to Violence

(NatSCEV), DOJ/OJJDP

NWS-3 Increase the number of States that have State-level policies that

incentivize food retail outlets to provide foods that are encouraged by the

Dietary Guidelines for Americans

Baseline: 8 States (including the District of Columbia) had State-level

policies that incentivized food retail outlets to provide foods that are encouraged by the Dietary Guidelines in 2001–09

Target: 18 States (including the District of Columbia)

Target-Setting Method: Projection/trend analysis

Data Source: State Indicator Report on Fruits and Vegetables, CDC

NWS-15 Increase the variety and contribution of vegetables to the diets of the

population aged 2 years and older.

NWS-15.1 Increase the contribution of total vegetables to the diets of the

population aged 2 years and older (LHI)

Baseline: 0.8 cup equivalent of total vegetables per 1,000

calories was the mean daily intake by persons aged 2 years and older in 2001–04 (age adjusted to the year

2000 standard population)

Target: 1.1 cup equivalent per 1,000 calories

Target-Setting Method: Modeling

Data Source: National Health and Nutrition Examination Survey

(NHANES), CDC/NCHS

PA-2 Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for musclestrengthening activity

PA-2.4 Increase the proportion of adults who meet the objectives for

aerobic physical activity and for muscle-strengthening activity (LHI)

Baseline: 18.2 percent of adults met the objectives for aerobic

physical activity and for muscle-strengthening activity

in 2008

Target: 20.1 percent

Target-Setting Method: 10 percent improvement

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

PA-10 Increase the proportion of the Nation's public and private schools that provide access to their physical activity spaces and facilities for all persons outside of normal school hours (that is, before and after the school day, on weekends, and during summer and other vacations)

Baseline: 28.8 percent of the Nation's public and private schools

provided access to their physical activity spaces and

facilities for all persons outside of normal school hours (that is, before and after the school day, on weekends, and during

summer and other vacations) in 2006

Target: 31.7 percent

Target-Setting Method: 10 percent improvement

Data Source: School Health Policies and Practices Study (SHPPS),

CDC/NCCDPHP

RD-2 Reduce hospitalizations for asthma

RD-2.1 Reduce hospitalizations for asthma among children under age 5

years

Baseline: 41.4 hospitalizations for asthma per 10,000 children

under age 5 years occurred in 2007

Target: 18.1 hospitalizations per 10,000

Target-Setting Method: Minimal statistical significance

Data Source: National Hospital Discharge Survey (NHDS),

CDC/NCHS

RD-2.2 Reduce hospitalizations for asthma among children and adults

aged 5 to 64 years

Baseline: 11.1 hospitalizations for asthma per 10,000 children

and adults aged 5 to 64 years occurred in 2007 (age

adjusted to the year 2000 standard population)

Target: 8.6 hospitalizations per 10,000

Target-Setting Method: Minimal statistical significance

Data Source: National Hospital Discharge Survey (NHDS),

CDC/NCHS

RD-2.3 Reduce hospitalizations for asthma among adults aged 65 years

and older

Baseline: 25.3 hospitalizations for asthma per 10,000 adults

aged 65 years and older occurred in 2007 (age

adjusted to the year 2000 standard population)

Target: 20.3 hospitalizations per 10,000

Target-Setting Method: Minimal statistical significance

Data Source: National Hospital Discharge Survey (NHDS),

CDC/NCHS

RD-5 Reduce the proportion of persons with asthma who miss school or work days

RD-5.1 Reduce the proportion of children aged 5 to 17 years with asthma

who miss school days

Baseline: 58.7 percent of children aged 5 to 17 years who had

an asthma episode or attack in the past 12 months missed school days due to asthma in the past 12

months in 2008

Target: 48.7 percent

Target-Setting Method: Minimal statistical significance

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

RD-5.2 Reduce the proportion of children aged 18 to 64 years with asthma

who miss work days

Baseline: 33.2 percent of adults aged 18 to 64 years who had

an asthma episode or attack in the past 12 months missed work days due to asthma in the past 12

months in 2008

Target: 26.8 percent

Target-Setting Method: Minimal statistical significance

Data Source: National Health Interview Survey (NHIS), CDC/NCHS

Social and Community Context:

AH-2 Increase the proportion of adolescents who participate in extracurricular and/or out-of-school activities

Baseline: 82.4 percent of adolescents aged 12 to 17 years participated

in extracurricular and/or out-of-school activities in the past 12

months, as reported in 2007

Target: 90.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Health (NSCH), CDC and

HRSA/MCH

AH-3 Increase the proportion of adolescents who are connected to a parent or other positive adult caregiver

AH-3.1 Increase the proportion of adolescents who have an adult in their

lives with whom they can talk about serious problems

Baseline: 75.7 percent of adolescents aged 12 to 17 years had

an adult in their lives with whom they could talk about

serious problems, as reported in 2008

Target: 83.3 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

AH-3.2 Increase the proportion of parents who attend events and activities

in which their adolescents participate

Baseline: 82.1 percent of adolescents aged 12 to 17 years who

participated in extracurricular or out-of-school

activities during the past 12 months had parents who reported they usually or always attended events and

activities in which their adolescents participated, as

reported in 2007

Target: 90.3 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Health (NSCH), CDC

and HRSA/MCH

AH-11 Reduce adolescent and young adult perpetration of, as well as victimization by, crimes

AH-11.1 Reduce the rate of minor and young adult perpetration of violent

crimes

Baseline: 444.0 per 100,000 adolescents and young adults

aged 10 to 24 years were arrested in 2008 for

perpetration of crimes included in the Violent Crime

Index

Target: 399.6 arrests per 100,000 population aged 10 to 24

years

Target-Setting Method: 10 percent improvement

Data Source: Uniform Crime Reporting Program (UCR), DOJ/FBI

AH-11.2 Reduce the rate of minor and young adult perpetration of serious

property crimes

Baseline: 1,526.7 per 100,000 adolescents and young adults

aged 10 to 24 years were arrested in 2008 for

perpetration of crimes included in the Property Crime

Index

Target: 1,374.0 arrests per 100,000 population aged 10 to 24

years

Target-Setting Method: 10 percent improvement

Data Source: Uniform Crime Reporting Program (UCR), DOJ/FBI

DH-17 Increase the proportion of adults with disabilities who report sufficient

social and emotional support

Baseline: 69.5 percent of adults with disabilities reported sufficient

social and emotional support in 2008

Target: 76.5 percent

Target-Setting Method: 10 percent improvement

Data Source: Behavioral Risk Factor Surveillance System (BRFSS),

CDC/PHSPO

DH-20 Increase the proportion of children with disabilities, birth through age

2 years, who receive early intervention services in home or community-

based settings

Baseline: 91.0 percent of children with disabilities, birth through age 2

years, received early intervention services in home or

community-based settings in 2007

Target: 95.0 percent

Target-Setting Method: Projection/trend analysis

Data Source: Data Accountability Center (DAC), ED/OSERS

EMC-2 Increase the proportion of parents who use positive parenting and

communicate with their doctors or other health care professionals about

positive parenting

EMC-2.2 Increase the proportion of parents who use positive communication

with their child

Baseline: 69.8 percent of children aged 6 to 17 years had

parents who reported that their child can share ideas or talk about things that matter "very well" in 2007

Target: 76.8 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Health (NSCH), CDC

and HRSA/MCH

EMC-2.3 Increase the proportion of parents who read to their young child

Baseline: 47.8 percent of children aged 0 to 5 years had

parents who reported that someone in their family read to the child every day in the past week in 2007

Target: 52.6 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Health (NSCH), CDC

and HRSA/MCH

EMC-2.4 Increase the proportion of parents who receive information from

their doctors of other health care professionals when they have a concern about their children's learning, development, or behavior

Baseline: 48.0 percent of children aged 0 to 5 years who visited

or used a health service in the past 12 months had parents who reported that their child's doctor asked about their concerns about their child's learning,

development, or behavior in 2007

Target: 52.8 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children's Health (NSCH), CDC

and HRSA/MCH

HC/HIT-7 Increase the proportion of adults who report having friends or family

members whom they talk with about their health

Baseline: 79.5 percent of adults reported having friends or family

members with whom they talk about their health in 2007

Target: 87.5 percent

Target-Setting Method: 10 percent improvement

Data Source: Health Information National Trends Survey (HINTS),

NIH/NCI

MHMD-4 Reduce the proportion of persons who experience major depressive

episodes

MHMD-4.1 Reduce the proportion of adolescents aged 12 to 17 years who

experience major depressive episodes (MDEs) (LHI)

Baseline: 8.3 percent of adolescents aged 12 to 17 years

experienced a major depressive episode in 2008

Target: 7.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

MHMD-4.2 Reduce the proportion of adolescents aged 18 years and older who

experience major depressive episodes (MDEs)

Baseline: 6.4 percent of adults aged 18 years and older

experienced a major depressive episode in 2008

Target: 5.8 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey on Drug Use and Health (NSDUH),

SAMHSA

MICH-21 Increase the proportion of infants who are breastfed

MICH-21.1 Increase the proportion of infants who are ever breastfed

Baseline: 74.0 percent of infants born in 2006 were ever

breastfed, as reported in 2007–09

Target: 81.9 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

MICH-21.2 Increase the proportion of infants who are ever breastfed at 6

months

Baseline: 43.5 percent of infants born in 2006 were breastfed at

6 months, as reported in 2007–09

Target: 60.6 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

MICH-21.3 Increase the proportion of infants who are breastfed at 1 year

Baseline: 22.7 percent of infants born in 2006 were breastfed at

1 year, as reported in 2007–09

Target: 34.1 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

MICH-21.4 Increase the proportion of infants who are breastfed exclusively

through 3 months

Baseline: 33.6 percent of infants born in 2006 were breastfed

exclusively through 3 months, as reported in 2007-09

Target: 46.2 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

MICH-21.5 Increase the proportion of infants who are breastfed exclusively

through 6 months

Baseline: 14.1 percent of infants born in 2006 were breastfed

exclusively through 6 months, as reported in 2007-09

Target: 25.5 percent

Target-Setting Method: Projection/trend analysis

Data Source: National Immunization Survey (NIS), CDC/NCHS and

CDC/NCIRP

MICH-31 Increase the proportion of children with special health care needs who

receive their care in family-centered, comprehensive, and coordinated

systems

MICH-31.1 Increase the proportion of children aged 0-11 years with special

health care needs who receive their care in family-centered,

comprehensive, and coordinated systems

Baseline: 20.4 percent of children aged 0 through 11 years with

special health care needs received their care in

family-centered, comprehensive, and coordinated

systems in 2005-06

Target: 22.4 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children with Special Health Care

Needs (NS-CSHCN), CDC and HRSA/MCH

MICH-31.2 Increase the proportion of children aged 12-17 years with special

health care needs who receive their care in family-centered,

comprehensive, and coordinated systems

Baseline: 13.8 percent of children aged 12 through 17 years

with special health care needs received their care in family-centered, comprehensive, and coordinated

systems in 2005-06

Target: 15.1 percent

Target-Setting Method: 10 percent improvement

Data Source: National Survey of Children with Special Health Care

Needs (NS-CSHCN), CDC and HRSA/MCH